

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF TEXAS

Case number (if known): _____ Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

 Check if this is an amended filing**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy****12/17**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	<p>Write the name that is on your government-issued picture identification (for example, your driver's license or passport).</p> <p>Bring your picture identification to your meeting with the trustee.</p>	<p>Tamara <input type="text"/> First Name P <input type="text"/> Middle Name Norman <input type="text"/> Last Name <input type="text"/> Suffix (Sr., Jr., II, III)</p> <p>First Name <input type="text"/> Middle Name <input type="text"/> Last Name <input type="text"/> Suffix (Sr., Jr., II, III) <input type="text"/></p>
2. All other names you have used in the last 8 years	<p>Include your married or maiden names.</p>	<p>First Name <input type="text"/> Middle Name <input type="text"/> Last Name <input type="text"/></p> <p>First Name <input type="text"/> Middle Name <input type="text"/> Last Name <input type="text"/></p>
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	<p>xxx - xx - <u>5</u> <u>6</u> <u>7</u> <u>7</u> OR 9xx - xx - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>xxx - xx - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OR 9xx - xx - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>

Debtor 1 Tamara P Norman

Case number (if known) _____

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

About Debtor 1:

I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

5. Where you live**5704 Spring Valley Rd, # 1080**

Number Street _____

Dallas TX 75254
City State ZIP Code

Dallas

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

Number Street _____

City State ZIP Code _____

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

Number Street _____

P.O. Box _____

P.O. Box _____

City State ZIP Code _____

City State ZIP Code _____

6. Why you are choosing this district to file for bankruptcy**Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Debtor 1 **Tamara P Norman**

Case number (if known) _____

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No

Yes.

District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No

Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
 MM / DD / YYYY if known

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
 MM / DD / YYYY if known

11. Do you rent your residence?

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City State ZIP Code

Debtor 1 **Tamara P Norman**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

No. I am not filing under Chapter 7. Go to line 18.
 Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No
 Yes

18. How many creditors do you estimate that you owe?

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Tamara P Norman

Tamara P Norman, Debtor 1

X _____

Signature of Debtor 2

Executed on 06/23/2019

MM / DD / YYYY

Executed on _____

MM / DD / YYYY

Debtor 1 Tamara P Norman Case number (if known) _____**For your attorney, if you are represented by one**
I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.**If you are not represented by an attorney, you do not need to file this page.****X** /s/ Weldon Reed Allmand _____ Date 06/23/2019
Signature of Attorney for Debtor MM / DD / YYYY**Weldon Reed Allmand**
Printed name**Allmand Law Firm, PLLC**
Firm Name**860 Airport Freeway, Suite 401**
Number Street**Hurst** _____ **TX** _____ **76054** _____
City State ZIP CodeContact phone (214) 265-0123 _____ Email address questions@allmandlaw.com**24027134** _____ State _____
Bar number

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

Chapter 7: Liquidation

\$245	filings fee
\$75	administrative fee
+	\$15 trustee surcharge
	\$335 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filings fee
+	\$550 administrative fee
<hr/>	
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+	\$75 administrative fee
<hr/>	
\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+	\$75 administrative fee
<hr/>	
\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case and this filing:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106A/B**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → \$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1.

Make: Chevy
 Model: Prizm
 Year: 1999
 Approximate mileage: 200,000

Other information:

1999 Chevy Prizm (approx. 200,000 miles)

Who has an interest in the property?

Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$1,775.00 \$1,775.00

Check if this is community property
(see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... → \$1,775.00

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?**

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe..... **See continuation page(s).**\$950.00**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe..... **See continuation page(s).**\$225.00**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe..... **Books, Family pictures**\$20.00**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe....._____**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe....._____**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe..... **Clothing 1 Adult**\$500.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe..... **Rings, Watches, Earrings, Necklaces, Bracelets, Costume jewelry**\$700.00**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe....._____**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information....._____**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....****\$2,395.00**

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash:

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking account:	<u>Checking account with Southern Bancorp (6592)</u>	<u>\$43.45</u>
17.2. Checking account:	<u>Checking account - Baxter Credit Union (8982-C1)</u>	<u>\$7.99</u>
17.3. Savings account:	<u>Savings account with Baxter Credit Union (8982)</u>	<u>\$1.00</u>

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them.....

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account: _____ Institution name: _____

401(k) or similar plan: 401(k)\$4,483.79

Debtor 1 Tamara P Norman Case number (if known) _____**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.....

Institution name or individual:

Security deposit on rental unit: **Security deposit on rental unit**

\$150.00

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description:**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them _____**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them _____**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them _____**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

Debtor 1 Tamara P Norman Case number (if known) _____**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information _____**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy

and list its value..... Company name: _____

Beneficiary: _____

Surrender or refund value: _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

 No Yes. Give specific information _____**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim..... _____**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim..... _____**35. Any financial assets you did not already list** No Yes. Give specific information _____**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....** → \$4,686.23**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe.. _____**39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe.. _____

Debtor 1 Tamara P Norman Case number (if known) _____**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

No
 Yes. Describe.. _____

41. Inventory

No
 Yes. Describe.. _____

42. Interests in partnerships or joint ventures

No
 Yes. Describe..... Name of entity: _____ % of ownership:

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
 No
 Yes. Describe..... _____

44. Any business-related property you did not already list

No
 Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... → \$0.00
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No
 Yes.... _____

48. Crops--either growing or harvested

No
 Yes. Give specific information..... _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No
 Yes.... _____

50. Farm and fishing supplies, chemicals, and feed

No
 Yes.... _____

Debtor 1 Tamara P Norman

Case number (if known) _____

51. Any farm- and commercial fishing-related property you did not already list

No
 Yes. Give specific information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... → \$0.00**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*

No
 Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$0.00**Part 8: List the Totals of Each Part of this Form****55. Part 1: Total real estate, line 2.....** → \$0.00**56. Part 2: Total vehicles, line 5** \$1,775.00**57. Part 3: Total personal and household items, line 15** \$2,395.00**58. Part 4: Total financial assets, line 36** \$4,686.23**59. Part 5: Total business-related property, line 45** \$0.00**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00**61. Part 7: Total other property not listed, line 54** \$0.00**62. Total personal property. Add lines 56 through 61.....** \$8,856.23 Copy personal property total → + \$8,856.23**63. Total of all property on Schedule A/B. Add line 55 + line 62.....** \$8,856.23

Debtor 1 Tamara P Norman Case number (if known) _____6. Household goods and furnishings (details):

Sofa	\$200.00
Loveseat	\$50.00
End tables	\$50.00
Dining room table and chairs	\$200.00
Dishes/Flatware	\$50.00
China/Silverware	\$50.00
Pots/Pans/Cookware	\$100.00
Bed	\$100.00
Dressers/Nightstands	\$100.00
Lamps/Accessories	\$50.00

7. Electronics (details):

2 Televisions	\$200.00
Cell phone	\$25.00

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
--	--------------------------------------	-----------------------------------	------------------------------------

Brief description:	<u>\$1,775.00</u>	<input checked="" type="checkbox"/> <u>\$1,775.00</u>	<u>11 U.S.C. § 522(d)(2)</u>
1999 Chevy Prizm (approx. 200,000 miles)		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Brief description:	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Sofa		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Brief description:	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: 6		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1 Tamara P Norman Case number (if known) _____**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption
Brief description: Loveseat	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: End tables	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Dining room table and chairs	<u>\$200.00</u>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Dishes/Flatware	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: China/Silverware	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Pots/Pans/Cookware	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Bed	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Dressers/Nightstands	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Lamps/Accessories	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			

Debtor 1 Tamara P Norman Case number (if known) _____**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: 2 Televisions	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>7</u>			
Brief description: Cell phone	<u>\$25.00</u>	<input checked="" type="checkbox"/> <u>\$25.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>7</u>			
Brief description: Books, Family pictures	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: Clothing 1 Adult	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: Rings, Watches, Earrings, Necklaces, Bracelets, Costume jewelry	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Line from <i>Schedule A/B</i> : <u>12</u>			
Brief description: Checking account with Southern Bancorp (6592)	<u>\$43.45</u>	<input checked="" type="checkbox"/> <u>\$43.45</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.1</u>			
Brief description: Savings account with Baxter Credit Union (8982)	<u>\$1.00</u>	<input checked="" type="checkbox"/> <u>\$1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.3</u>			
Brief description: Checking account - Baxter Credit Union (8982-C1)	<u>\$7.99</u>	<input checked="" type="checkbox"/> <u>\$7.99</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.2</u>			
Brief description: 401(k)	<u>\$4,483.79</u>	<input checked="" type="checkbox"/> <u>\$4,483.79</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
Line from <i>Schedule A/B</i> : <u>21</u>			

Debtor 1 Tamara P Norman Case number (if known) _____**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Security deposit on rental unit	<u>\$150.00</u>	Copy the value from <i>Schedule A/B</i> <input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>22</u>			

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Tamara P Norman**

CASE NO

CHAPTER **7**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$1,775.00	\$0.00	\$1,775.00	\$1,775.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$950.00	\$0.00	\$950.00	\$950.00	\$0.00
7.	Electronics	\$225.00	\$0.00	\$225.00	\$225.00	\$0.00
8.	Collectibles of value	\$20.00	\$0.00	\$20.00	\$20.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$500.00	\$0.00	\$500.00	\$500.00	\$0.00
12.	Jewelry	\$700.00	\$0.00	\$700.00	\$700.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household items- incl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$52.44	\$0.00	\$52.44	\$52.44	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$4,483.79	\$0.00	\$4,483.79	\$4,483.79	\$0.00
22.	Security deposits and prepayments	\$150.00	\$0.00	\$150.00	\$150.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Tamara P Norman**

CASE NO

CHAPTER **7**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops--either growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$8,856.23	\$0.00	\$8,856.23	\$8,856.23	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Tamara P Norman**

CASE NO

CHAPTER **7**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
Real Property			
(None)			
Personal Property			
(None)			
TOTALS:	\$0.00	\$0.00	\$0.00

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
(None)				
Personal Property				
(None)				
TOTALS:	\$0.00	\$0.00	\$0.00	\$0.00

Summary	
A. Gross Property Value (not including surrendered property)	\$8,856.23
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$8,856.23
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$0.00
G. Total Equity (not including surrendered property) / (A-D)	\$8,856.23
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$8,856.23
J. Total Exemptions Claimed (Wild Card Used: \$202.44, Available: \$13,697.56)	\$8,856.23
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

<i>Column A</i> Amount of claim Do not deduct the value of collateral	<i>Column B</i> Value of collateral that supports this claim	<i>Column C</i> Unsecured portion If any
--	--	---

2.1

Describe the property that secures the claim:

Creditor's name _____

Number Street _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim relates to a community debt**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset)

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$0.00

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

	Total claim	Priority amount	Nonpriority amount
--	-------------	-----------------	--------------------

2.1	_____	_____	_____
Priority Creditor's Name	Last 4 digits of account number		
Number Street	When was the debt incurred?		
City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.
Who incurred the debt? Check one.		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Type of PRIORITY unsecured claim:			
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
Is the claim subject to offset?			
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1	Ad Astra Recovery Nonpriority Creditor's Name 7330 West 33rd Street North Number Street Suite 118	Last 4 digits of account number <u>2</u> <u>5</u> <u>6</u> <u>6</u> When was the debt incurred? <u>09/2013</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for -SPEEDY CASH 107
		\$658.00
4.2	Capital One Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 30285	Last 4 digits of account number <u>7</u> <u>2</u> <u>3</u> <u>3</u> When was the debt incurred? <u>08/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$1,170.00
		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3	Central Credit Services, LLC Nonpriority Creditor's Name 9550 Regency Square Blvd Number Street Suite 500A Jacksonville FL 32225 City State ZIP Code	Last 4 digits of account number <u>3</u> <u>4</u> <u>5</u> <u>5</u> When was the debt incurred? <u>09/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$427.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for -QUESTCARE INTENSIVISTS PLLC
		\$617.52
Client Services Nonpriority Creditor's Name 3451 Harry S. Truman Blvd Number Street Saint Charles MO 63301 City State ZIP Code		Last 4 digits of account number <u>9</u> <u>6</u> <u>1</u> <u>0</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$617.52
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for -Capital One BAnk
		(\$1.00)
Department of Education/Nelnet Nonpriority Creditor's Name Attn: Claims Number Street PO Box 82505 Lincoln NE 68501 City State ZIP Code		Last 4 digits of account number <u>3</u> <u>3</u> <u>9</u> <u>9</u> When was the debt incurred? <u>09/2008</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		(\$1.00)
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.6****(\$1.00)****Department of Education/Nelnet**

Nonpriority Creditor's Name

Attn: ClaimsNumber Street
PO Box 82505Last 4 digits of account number 3 4 9 9When was the debt incurred? 09/2008

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **Lincoln** State **NE** ZIP Code **68501**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

4.7**(\$1.00)****Department of Education/Nelnet**

Nonpriority Creditor's Name

Attn: ClaimsNumber Street
PO Box 82505Last 4 digits of account number 1 2 9 9When was the debt incurred? 09/2009

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **Lincoln** State **NE** ZIP Code **68501**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

4.8**(\$1.00)****Department of Education/Nelnet**

Nonpriority Creditor's Name

Attn: ClaimsNumber Street
PO Box 82505Last 4 digits of account number 1 1 9 9When was the debt incurred? 09/2009

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **Lincoln** State **NE** ZIP Code **68501**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim4.9 \$253.00**Diversified Consultants, Inc.**

Nonpriority Creditor's Name

Attn: BankruptcyNumber Street
PO Box 551268Last 4 digits of account number 9 3 4 3When was the debt incurred? 08/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Jacksonville FL 32255

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for -CHARTER COMMUNICATION

4.10

(\$1.00)**EdFinancial Services**

Nonpriority Creditor's Name

Attn: BankruptcyNumber Street
PO Box 36008Last 4 digits of account number 0 0 0 1When was the debt incurred? 09/2002

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Knoxville TN 37930

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.11

(\$1.00)**EdFinancial Services**

Nonpriority Creditor's Name

Attn: BankruptcyNumber Street
PO Box 36008Last 4 digits of account number 0 0 0 2When was the debt incurred? 09/2002

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Knoxville TN 37930

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.12****\$380.00****Financial Control Services**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 21626**Waco TX 76702**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 1 8 6 6When was the debt incurred? 12/2013

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for -QUESTCARE ER-PLANO

4.13**\$340.00****Financial Control Services**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 21626**Waco TX 76702**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 8 9 2 9When was the debt incurred? 08/28/2017

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for -QUESTCARE ER MED CITY

4.14**\$565.02****Financial Recovery Service Inc.**

Nonpriority Creditor's Name

Attn: Officer or Managing Agent

Number Street

P.O. Box 385908**Minneapolis MN 55438-5908**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number J 4 2 1

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - Target

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.15****\$50.96****LabCorp**
Nonpriority Creditor's Name
P.O. Box 2240
Number StreetLast 4 digits of account number 3 7 2 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Burlington NC 27216-2240
City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Medical Bills

Is the claim subject to offset?

No
 Yes

4.16**\$4,472.00****Medicredit Inc.**
Nonpriority Creditor's Name
PO Box 1629
Number StreetLast 4 digits of account number 2 7 0 2When was the debt incurred? 11/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Maryland Heights MO 63043
City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - MEDICAL CITY DALLAS

Is the claim subject to offset?

No
 Yes

4.17**\$1,751.00****Medicredit Inc.**
Nonpriority Creditor's Name
Attn HCA Settlement Campaign
Number Street
PO Box 1629Last 4 digits of account number 7 7 8 4When was the debt incurred? 4/1/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Maryland Heights MO 63043
City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - MEDICAL CITY DALLAS

Is the claim subject to offset?

No
 Yes

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.18****(\$1.00)****Mohela**
Nonpriority Creditor's Name
633 Spirit Dr
Number StreetLast 4 digits of account number 0 0 0 1When was the debt incurred? 01/2006

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Chesterfield **MO** **63005**
City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

4.19**(\$1.00)****Mohela**
Nonpriority Creditor's Name
633 Spirit Dr
Number StreetLast 4 digits of account number 0 0 0 2When was the debt incurred? 01/2006

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Chesterfield **MO** **63005**
City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

4.20**(\$1.00)****Mohela**
Nonpriority Creditor's Name
633 Spirit Dr
Number StreetLast 4 digits of account number 0 0 0 6When was the debt incurred? 09/2007

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Chesterfield **MO** **63005**
City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.21****(\$1.00)****Mohela**
Nonpriority Creditor's Name
633 Spirit Dr
Number StreetLast 4 digits of account number 0 0 0 4When was the debt incurred? 09/2006

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Chesterfield **MO** **63005**
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.22**(\$1.00)****Mohela**
Nonpriority Creditor's Name
633 Spirit Dr
Number StreetLast 4 digits of account number 0 0 0 5When was the debt incurred? 09/2007

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Chesterfield **MO** **63005**
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.23**(\$1.00)****Mohela**
Nonpriority Creditor's Name
633 Spirit Dr
Number StreetLast 4 digits of account number 0 0 0 3When was the debt incurred? 09/2006

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Chesterfield **MO** **63005**
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$1,751.00****4.24****Npas Solutions**

Nonpriority Creditor's Name

PO Box 2248

Number Street

Last 4 digits of account number 6 8 6 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Maryland Heights MO 63043

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Collecting for - Medical City Dallas**

Unknown**4.25****NTTA**

Nonpriority Creditor's Name

PO Box 660244

Number Street

Last 4 digits of account number 2 1 3 2

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Dallas TX 75266

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Tolls**

\$47.31**4.26****NTTA**

Nonpriority Creditor's Name

PO Box 660244

Number Street

Last 4 digits of account number 8 5 3 2

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Dallas TX 75266

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Tolls**

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.27****\$43.42****NTTA**
Nonpriority Creditor's Name
PO Box 660244
Number StreetLast 4 digits of account number 3 6 6 3

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Dallas TX 75266
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Tolls

4.28**\$663.67****NTTA**
Nonpriority Creditor's Name
PO Box 660244
Number StreetLast 4 digits of account number 6 5 3 8

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Dallas TX 75266
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Tolls

4.29**(\$1.00)****Oklahoma Student Loan Authority/OSLA**
Nonpriority Creditor's Name
525 Central Park Drive
Number Street
Suite 600Last 4 digits of account number 2 6 7 9When was the debt incurred? 09/2009

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Oklahoma City OK 73105
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.30****(\$1.00)****Oklahoma Student Loan Authority/OSLA**Nonpriority Creditor's Name
525 Central Park DriveNumber Street
Suite 600**Oklahoma City OK 73105**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 6 0 7 9When was the debt incurred? 09/2008

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.31**(\$1.00)****Oklahoma Student Loan Authority/OSLA**Nonpriority Creditor's Name
525 Central Park DriveNumber Street
Suite 600**Oklahoma City OK 73105**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 6 1 7 9When was the debt incurred? 09/2008

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.32**(\$1.00)****Oklahoma Student Loan Authority/OSLA**Nonpriority Creditor's Name
525 Central Park DriveNumber Street
Suite 600**Oklahoma City OK 73105**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 2 7 7 9When was the debt incurred? 09/2009

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Debtor 1 Tamara P Norman Case number (if known) _____**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim4.33 \$12,270.00

Regional Acceptance Co
 Nonpriority Creditor's Name
Attn: Bankruptcy
 Number Street
PO Box 1487

Last 4 digits of account number 9 0 0 1When was the debt incurred? 05/2015

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Wilson **NC** **27894**
 City State ZIP Code
Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Repo Deficiency

Is the claim subject to offset?
 No
 Yes

4.34 \$322.00

RS Clark & Associates
 Nonpriority Creditor's Name
12990 Pandora Drive
 Number Street
Suite 150

Last 4 digits of account number 9 7 9 9When was the debt incurred? 09/2014

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Dallas **TX** **75238**
 City State ZIP Code
Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for -GAYLE V VOTH MD PA

Is the claim subject to offset?
 No
 Yes

4.35 \$926.00

Syncb/Mattress Firm
 Nonpriority Creditor's Name
Attn: Bankruptcy
 Number Street
PO Box 965004

Last 4 digits of account number 7 3 3 6When was the debt incurred? 10/2016

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Orlando **FL** **32896**
 City State ZIP Code
Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Charge Account

Is the claim subject to offset?
 No
 Yes

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.36****\$565.00****Target**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 9475Last 4 digits of account number 2 7 0 0When was the debt incurred? 11/2016

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Minneapolis MN 55440

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

4.37**\$635.00****United Revenue Corp**

Nonpriority Creditor's Name

204 Billings St

Number Street

Suite 120Last 4 digits of account number 5 8 4 3When was the debt incurred? 01/2013

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Arlington TX 76010

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - TEXAS MEDICINE RESOURCES

4.38**\$803.00****University of Arkansas**

Nonpriority Creditor's Name

Pulaski Technical College

Number Street

3000 West Scenic DriveLast 4 digits of account number 1 3 2 9

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

North Little Rock AR 72118

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Services

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.39****\$80,290.00****Us Dept Of Ed/gleisi**

Nonpriority Creditor's Name

2401 International Lane

Number Street

Last 4 digits of account number 8 5 8 1When was the debt incurred? 05/2016

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Madison WI 53704

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Is the claim subject to offset?

No
 Yes

Debtor 1 Tamara P Norman Case number (if known) _____**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	<u>\$0.00</u>

	Total claim
Total claims from Part 2	
6f. Student loans	6f. <u>\$80,274.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$28,710.90</u>
6j. Total. Add lines 6f through 6i.	<u>\$108,984.90</u>

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for	
2.1	<u>PC The Ridge On Spring Valley LLC</u> Name <u>5704 Spring Valley Road</u> Number Street	<u>Apartment Lease Contract</u> <u>Contract to be ASSUMED</u>	
	<u>Dallas</u> City	<u>TX</u> State	<u>75254</u> ZIP Code

Fill in this information to identify your case:		
Debtor 1	<u>Tamara</u>	<u>P</u>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>		
Case number (if known)		

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No
 Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this information to identify your case:

Debtor 1	Tamara	P	Norman
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)			

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Debtor 1****Debtor 2 or non-filing spouse**

Employed
 Not employed

Employed
 Not employed

Occupation**Senior Process Analyst****Employer's name****United Health Care Insurance****Employer's address****PO Box 1459**

Number Street

Number Street

Minneapolis**MN 55440**

City

State

Zip Code

City

State Zip Code

How long employed there? **04/2013****Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1**For Debtor 2 or non-filing spouse**

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. **\$5,341.59**

3. Estimate and list monthly overtime pay.

3. + **\$0.00**

4. Calculate gross income. Add line 2 + line 3.

4. **\$5,341.59**

Debtor 1	Tamara P Norman	Case number (if known)	
		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	\$5,341.59	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$1,113.74	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$106.84	
5d. Required repayments of retirement fund loans	5d.	\$54.97	
5e. Insurance	5e.	\$77.98	
5f. Domestic support obligations	5f.	\$0.00	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: <u>See continuation sheet</u>	5h. +	\$94.11	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,447.64	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,893.95	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
8d. Unemployment compensation	8d.	\$0.00	
8e. Social Security	8e.	\$0.00	
8f. Other government assistance that you regularly receive			
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	
8h. Other monthly income. Specify: _____	8h. +	\$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,893.95	+ _____ = \$3,893.95
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12.	\$3,893.95	
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?	<input type="checkbox"/> No. <u>Debtor uses her parents address as her home address, she will be getting a Texas ID. She has lived in Texas since 2012.</u> <input checked="" type="checkbox"/> Yes. Explain: _____		

Debtor 1 Tamara P Norman Case number (if known) _____

5h. Other Payroll Deductions (details)	For Debtor 1	For Debtor 2 or non-filing spouse
Supp. Life	\$21.43	_____
LTD	\$31.01	_____
HSA	\$41.67	_____
Totals:	\$94.11	_____

Fill in this information to identify your case:

Debtor 1	Tamara	P	Norman
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)			

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

No. Go to line 2.
 Yes. **Does Debtor 2 live in a separate household?**
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Son	21	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

	<u>Your expenses</u>
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	4. <u>\$846.00</u>
If not included in line 4:	
4a. Real estate taxes	4a. _____
4b. Property, homeowner's, or renter's insurance	4b. <u>\$19.47</u>
4c. Home maintenance, repair, and upkeep expenses	4c. <u>\$20.00</u>
4d. Homeowner's association or condominium dues	4d. _____

Debtor 1	<u>Tamara P Norman</u>	Case number (if known)	
		<u>Your expenses</u>	
5.	Additional mortgage payments for your residence, such as home equity loans		
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	<u>\$200.00</u>
6b.	Water, sewer, garbage collection	6b.	<u>\$59.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$57.00</u>
6d.	Other. Specify: <u>Cell Phone</u>	6d.	<u>\$100.00</u>
7.	Food and housekeeping supplies		
8.	Childcare and children's education costs		
9.	Clothing, laundry, and dry cleaning		
10.	Personal care products and services		
11.	Medical and dental expenses		
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		
13.	Entertainment, clubs, recreation, newspapers, magazines, and books		
14.	Charitable contributions and religious donations		
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	
15b.	Health insurance	15b.	
15c.	Vehicle insurance	15c.	<u>\$88.00</u>
15d.	Other insurance. Specify: _____	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
16.	16.		
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	
17b.	Car payments for Vehicle 2	17b.	
17c.	Other. Specify: <u>IRS</u>	17c.	<u>\$500.00</u>
17d.	Other. Specify: _____	17d.	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
18.	18.		
19.	Other payments you make to support others who do not live with you. Specify: <u>Parents and Grandchild</u>		
19.	19.		<u>\$300.00</u>

Debtor 1 Tamara P Norman Case number (if known) _____**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: _____

21. + _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a. _____ \$3,889.47
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. _____ \$3,889.47

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$3,893.95
23b. Copy your monthly expenses from line 22c above.	23b. - _____ \$3,889.47
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. _____ \$4.48

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes.

Explain here:

Will be contacting the IRS to get on a payment plan - owes for 2016-2018.

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<u>\$8,856.23</u>
1c. Copy line 63, Total of all property on Schedule A/B.....	<u>\$8,856.23</u>

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<u>\$0.00</u>
---	---------------

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<u>\$0.00</u>
---	---------------

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<u>+</u>	<u>\$108,984.90</u>
--	----------	---------------------

Your total liabilities

\$108,984.90

Part 3: Summarize Your Income and Expenses4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<u>\$3,893.95</u>
---	-------------------

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<u>\$3,889.47</u>
---	-------------------

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$6,031.58

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$80,274.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<u>+ \$0.00</u>
9g. Total. Add lines 9a through 9f.	<u>\$80,274.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Tamara P Norman
Tamara P Norman, Debtor 1

Date 06/23/2019
MM / DD / YYYY

X _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>7324 Skillman St. # 912</u> Number Street		From <u>6/2012</u>	From _____
		To <u>4/2016</u>	To _____
<u>Dallas</u> <u>TX</u> <u>75231</u> City State ZIP Code		City State ZIP Code	
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>5616 Spring Valey Rd.</u> Number Street		From <u>4/2016</u>	From _____
		To <u>10/2016</u>	To _____
<u>Dallas</u> <u>TX</u> <u>75254</u> City State ZIP Code		City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$17,720.35	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the last calendar year: (January 1 to December 31, <u>2018</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$50,469.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2017</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$44,994.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

 No Yes. Fill in the details.

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<u>PC The Ridge On Spring Valley LLC</u> Creditor's name		<u>\$2,538.00</u>		<input type="checkbox"/> Mortgage
<u>5704 Spring Valley Road</u> Number Street	<u>Last 90 Days</u>			<input type="checkbox"/> Car
<u>Dallas</u> City	<u>TX</u> State	<u>75254</u> ZIP Code		<input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Rent</u>

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

No

Yes. List all payments to an insider.

Debtor 1 Tamara P Norman Case number (if known) _____

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No
 Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No
 Yes. Fill in the details.

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.
 Yes. Fill in the information below.

Regional Acceptance	Describe the property	Date	Value of the property
Creditor's Name	2013 Nissan Sentra	10/2018	\$14,000.00
PO Box 580306	Explain what happened		
Number Street	<input checked="" type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Charlotte	NC 28258	State ZIP Code	

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No
 Yes. Fill in the details.

<u>Allmand Law Firm, PLLC</u> Person Who Was Paid	Description and value of any property transferred Attorney fees	Date payment or transfer was made	Amount of payment
<u>860 Airport Freeway, Suite 401</u> Number Street		<u>This Year</u>	<u>\$1,800.00</u>

Hurst TX 76054
City State ZIP Code

Email or website address _____

Person Who Made the Payment, if Not You _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Debtor 1 Tamara P Norman

Case number (if known) _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)** No Yes. Fill in the details.**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units****20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
XXXX- <u>0</u> <u>7</u> <u>1</u> <u>1</u>	<input checked="" type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	<u>10/31/2018</u>	<u>\$800.00</u>
Wells Fargo Name of Financial Institution 1220 North Town East, Suite 120 Number Street			

Mesquite **TX** **75150**
City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?** No Yes. Fill in the details.

Debtor 1 Tamara P Norman Case number (if known) _____**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Tamara P Norman

Tamara P Norman, Debtor 1

X _____

Signature of Debtor 2

Date 06/23/2019

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:		
Debtor 1	<u>Tamara</u>	<u>P</u>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>		
Case number (if known)		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
None.		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will this lease be assumed?
--	-----------------------------

Lessor's name: **PC The Ridge On Spring Valley LLC**
 Description of leased property: **Apartment Lease Contract**

No
 Yes

Debtor 1 Tamara P Norman Case number (if known) _____

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Tamara P Norman _____ **X** _____
Tamara P Norman, Debtor 1 Signature of Debtor 2

Date 06/23/2019 _____ Date _____
MM / DD / YYYY MM / DD / YYYY

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

In re **Tamara P Norman**

Case No. _____

Chapter 7 _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u>\$1,800.00</u>
Prior to the filing of this statement I have received.....	<u>\$1,800.00</u>
Balance Due.....	<u>\$0.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Preparation and filing of schedules, statements, other documents not filed with the petition

Issues that arise that are not specifically listed in the Retainer

Discharge Proceeding brought by client, including those related to IRS debt, student loans or marital debt

Motions for relief, continuation, defense or enforcement of the Automatic Stay

Motions to Redeem Personal Property

Motions to Avoid Liens or Judgments

Other Contested matters, Discovery or Adversary Proceedings

Contested matters involving client's claim of exemptions

Filing any amendments to Clients' Schedules

Motions to continue the 341 meeting of creditors and/or appearing for a continued 341 hearing

Motions or adversary complaints to abandon/refinance/sell/purchase property;

Assisting in carrying out the Debtor's Statement of Intentions;

Monitoring an "asset case"

Re-opening a bankruptcy case to submit post-filing proof of pre-discharge counseling

Defense of Objection to Discharge or Motion to Dismiss Case

Negotiation, review and execution of Reaffirmation Agreement

Appearance at a hearing to prove up a Reaffirmation Agreement

Motions to Assume a contract or lease

Dishonored or Cancelled ACH drafts

Missed or cancelled appointment/meeting Services related to case being selected for audit by the U.S. Trustee's

Office

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/23/2019

Date

/s/ Weldon Reed Allmand

Weldon Reed Allmand

Bar No. 24027134

Allmand Law Firm, PLLC

860 Airport Freeway, Suite 401

Hurst, TX 76054

Phone: (214) 265-0123 / Fax: (214) 265-1979

/s/ Tamara P Norman

Tamara P Norman

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

IN RE: **Tamara P Norman**

CASE NO

CHAPTER **7**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 6/23/2019

Signature */s/ Tamara P Norman*
Tamara P Norman

Date _____

Signature _____

Ad Astra Recovery
7330 West 33rd Street North
Suite 118
Wichita, KS 67205

Attorney General of Texas/ Child Support
Bankruptcy Reporting Contact
OAG/ CSD/ Mail Code 38
P. O. Box 12017
Austin, TX 78711-2017

Capital One
Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130

Central Credit Services, LLC
9550 Regency Square Blvd
Suite 500A
Jacksonville, FL 32225

Client Services
3451 Harry S. Truman Blvd
Saint Charles, MO 63301

Department of Education/Nelnet
Attn: Claims
PO Box 82505
Lincoln, NE 68501

Diversified Consultants, Inc.
Attn: Bankruptcy
PO Box 551268
Jacksonville, FL 32255

EdFinancial Services
Attn: Bankruptcy
PO Box 36008
Knoxville, TN 37930

Financial Control Services
Attn: Bankruptcy
PO Box 21626
Waco, TX 76702

Financial Recovery Service Inc.
Attn: Officer or Managing Agent
P.O. Box 385908
Minneapolis, MN 55438-5908

Internal Revenue Service
Insolvency
P.O. Box 21126
Philadelphia, PA 19114

LabCorp
P.O. Box 2240
Burlington, North Carolina 27216-2240

Linebarger Goggan Blair et al
2777 N. Stemmons Freeway, Suite 1000
Dallas, Texas 75207

Medicredit Inc.
PO Box 1629
Maryland Heights, MO 63043

Medicredit Inc.
Attn HCA Settlement Campaign
PO Box 1629
Maryland Heights, MO 63043

Mohela
633 Spirit Dr
Chesterfield, MO 63005

Npas Solutions
PO Box 2248
Maryland Heights, MO 63043

NTTA
PO Box 660244
Dallas, TX 75266

Oklahoma Student Loan Authority/OSLA
525 Central Park Drive
Suite 600
Oklahoma City, OK 73105

PC The Ridge On Spring Valley LLC
5704 Spring Valley Road
Dallas, TX 75254

Regional Acceptance Co
Attn: Bankruptcy
PO Box 1487
Wilson, NC 27894

RS Clark & Associates
12990 Pandora Drive
Suite 150
Dallas, TX 75238

State Comptroller
Revenue Accounting Div Bankrup
PO Box 13528
Austin, Tx 78111

Synccb/Mattress Firm
Attn: Bankruptcy
PO Box 965004
Orlando, FL 32896

Target
Attn: Bankruptcy
PO Box 9475
Minneapolis, MN 55440

Texas Alcoholic Beverage Comm
Licences and Permits Division
P.O. Box 13127
Austin, TX 78711-3127

TEXAS EMPLOYMENT COMMISSION
TEC BUILDING-BANKRUPTCY
101 E. 15TH STREET
AUSTIN, TX 78778

United Revenue Corp
204 Billings St
Suite 120
Arlington, TX 76010

United States Attorney - NORTH
3rd Floor, 1100 Commerce St.
Dallas, TX 75242

United States Trustee
1100 Commerce St., Room 976
Dallas, TX 75242

University of Arkansas
Pulaski Technical College
3000 West Scenic Drive
North Little Rock, AR 72118

Us Dept Of Ed/glelsi
2401 International Lane
Madison, WI 53704

Fill in this information to identify your case:			Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. **What is your marital and filing status?** Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A	Column B
	Debtor 1	Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<u>\$6,031.58</u>	_____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	<u>\$0.00</u>	_____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<u>\$0.00</u>	_____

Debtor 1 Tamara P Norman

Case number (if known) _____

Column A
Debtor 1**Column B**
**Debtor 2 or
non-filing spouse****5. Net income from operating a business, profession, or farm****Debtor 1** **Debtor 2**Gross receipts (before all
deductions) **\$0.00** _____Ordinary and necessary operating
expenses - **\$0.00** - _____Net monthly income from a business,
profession, or farm **\$0.00** _____ Copy
here → **\$0.00** _____**6. Net income from rental and other real property****Debtor 1** **Debtor 2**Gross receipts (before all
deductions) **\$0.00** _____Ordinary and necessary operating
expenses - **\$0.00** - _____Net monthly income from rental or
other real property **\$0.00** _____ Copy
here → **\$0.00** _____**7. Interest, dividends, and royalties**_____ **\$0.00** _____**8. Unemployment compensation**_____ **\$0.00** _____Do not enter the amount if you contend that the amount received was a
benefit under the Social Security Act. Instead, list it here: For you..... **\$0.00** _____

For your spouse..... _____

9. Pension or retirement income. Do not include any amount received that
was a benefit under the Social Security Act. **\$0.00** _____**10. Income from all other sources not listed above.** Specify the source and
amount. Do not include any benefits received under the Social Security Act
or payments received as a victim of a war crime, a crime against humanity,
or international or domestic terrorism. If necessary, list other sources on a
separate page and put the total below.

Total amounts from separate pages, if any.

+ _____ + _____

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$6,031.58 + **_____** = **\$6,031.58**Total current
monthly income

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Determine Whether the Means Test Applies to You**12. Calculate your current monthly income for the year. Follow these steps:**12a. Copy your total current monthly income from line 11.....Copy line 11 here → 12a. \$6,031.58

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form.

12b. \$72,378.96**13. Calculate the median family income that applies to you. Follow these steps:**

Fill in the state in which you live.

Texas

Fill in the number of people in your household.

2Fill in the median family income for your state and size of household..... 13. \$65,429.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*.
Go to Part 3.14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.
Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Tamara P Norman

Tamara P Norman, Debtor 1

X

Signature of Debtor 2

Date 6/23/2019

MM / DD / YYYY

Date

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:			Check the appropriate box as directed in lines 40 or 42:
Debtor 1	<u>Tamara</u>	<u>P</u>	<u>Norman</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

According to the calculation required by this Statement:

1. There is no presumption of abuse.

2. There is a presumption of abuse.

Check if this is an amended filing

Official Form 122A-2**Chapter 7 Means Test Calculation****04/19**

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income

1. Copy your total current monthly income.....Copy line 11 from Official Form 122A-1 here →..... 1. \$6,031.58

2. Did you fill out Column B in Part 1 of Form 122A-1?

No. Fill in \$0 for the total on line 3.

Yes. Is your spouse filing with you?

No. Go to line 3.

Yes. Fill in \$0 for the total on line 3.

3. Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents. Follow these steps:

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

No. Fill in \$0 for the total on line 3.

Yes. Fill in the information below:

State each purpose for which the income was used

For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents

Fill in the amount you are subtracting from your spouse's income

+

Total \$0.00

Copy total here → - \$0.00

\$6,031.58

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.	<u>\$1,288.00</u>
7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.	

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person	<u>\$55.00</u>
7b. Number of people who are under 65	<u>X 2</u>
7c. Subtotal. Multiply line 7a by line 7b.	<u>\$110.00</u> Copy here ➔ <u>\$110.00</u>

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person	<u>\$114.00</u>
7e. Number of people who are 65 or older	<u>X</u>
7f. Subtotal. Multiply line 7d by line 7e.	<u>\$0.00</u> Copy here ➔ + <u>\$0.00</u>

7g. **Total.** Add lines 7c and 7f.....

Copy total here ➔

\$110.00

\$110.00

Debtor 1 **Tamara P Norman**

Case number (if known)

Local Standards

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- **Housing and utilities -- Insurance and operating expenses**
- **Housing and utilities -- Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities -- Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. **\$609.00**

9. **Housing and utilities -- Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. **\$1,172.00**

9b. Total average monthly payment for all mortgages and other debts secured by your home

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
-----------------------------	--------------------------------

+ _____

Copy
here

Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0.

\$1,172.00 **Copy here ➔** **\$1,172.00**

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain
why:

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- 1. Go to line 12.
- 2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Debtor 1 Tamara P Norman Case number (if known) _____

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1**Describe Vehicle 1:**13a. Ownership or leasing costs using IRS Local Standard. **\$200.00**

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
-------------------------------------	-------------------------

_____	_____	+	_____
-------	-------	---	-------

Total average monthly payment

\$0.00

Copy here →

\$0.00

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense.

Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.

\$200.00

Copy net Vehicle 1 expense here →

\$200.00**Vehicle 2****Describe Vehicle 2:**

13d. Ownership or leasing costs using IRS Local Standard.

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
-------------------------------------	-------------------------

_____	_____	+	_____
-------	-------	---	-------

Total average monthly payment

Copy here →

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense.

Subtract line 13e from 13d. If this amount is less than \$0, enter \$0.

Copy net Vehicle 2 expense here →

\$0.00

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

\$0.00

Debtor 1 Tamara P Norman Case number (if known) _____

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. \$0.00

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. \$1,815.57

Do not include real estate, sales, or use taxes.

17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$0.00

Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.

18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, or a non-filing spouse's life insurance, or for any form of life insurance other than term. \$18.94

19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$0.00

Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.

20. **Education:** The total monthly amount that you pay for education that is either required:
 as a condition for your job, or
 for your physically or mentally challenged dependent child if no public education is available for similar services. \$0.00

21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. \$0.00

22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.
 Payments for health insurance or health savings accounts should be listed only in line 25. \$190.00

23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + \$100.00

Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.

24. **Add all of the expenses allowed under the IRS expense allowances.**
 Add lines 6 through 23. \$5,784.51

Debtor 1 Tamara P Norman Case number (if known) _____

Additional Expense Deductions These are additional deductions allowed by the Means Test.
 Note: Do not include any expense allowances listed in lines 6-24.

25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	<u>\$77.98</u>
Disability insurance	<u>\$30.16</u>
Health savings account	<u>+ \$38.62</u>
Total	<u>\$146.76</u>

Copy total here → **\$146.76**

Do you actually spend this total amount?

No. How much do you actually spend? _____

Yes

26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). **\$0.00**

27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. **\$0.00**

By law, the court must keep the nature of these expenses confidential.

28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. _____

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. **\$0.00**

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. _____

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2). **+\$200.00**

Debtor 1 Tamara P Norman

Case number (if known) _____

32. Add all of the additional expense deductions.

Add lines 25 through 31.

\$346.76**Deductions for Debt Payment**

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthly payment**Mortgages on your home:**33a. Copy line 9b here..... → **\$0.00****Loans on your first two vehicles:**33b. Copy line 13b here..... → **\$0.00**33c. Copy line 13e here..... → **\$0.00**

33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?
_____	_____	<input type="checkbox"/> No _____ <input type="checkbox"/> Yes _____
_____	_____	<input type="checkbox"/> No _____ <input type="checkbox"/> Yes _____
_____	_____	<input type="checkbox"/> No + _____ <input type="checkbox"/> Yes _____

33e. Total average monthly payment. Add lines 33a through 33d..... **\$0.00** → **\$0.00**

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

 No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
_____	_____	÷ 60 = _____	_____
_____	_____	÷ 60 = _____	_____
_____	_____	÷ 60 = + _____	_____
Total		\$0.00	Copy total here → \$0.00

Debtor 1 Tamara P Norman Case number (if known) _____

35. Do you owe any priority claims such as a priority tax, child support, or alimony -- that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

No. Go to line 36.
 Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims..... _____ ÷ 60 = _____ \$0.00

36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e).

For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office.

No. Go to line 37.
 Yes. Fill in the following information.

Projected monthly plan payment if you were filing under Chapter 13 _____

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

x _____ %

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense if you were filing under Chapter 13

Copy total here → _____

\$0.00

37. Add all of the deductions for debt payment.

Add lines 33e through 36.

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances..... \$5,784.51

Copy line 32, All of the additional expense deductions.... \$346.76

Copy line 37, All of the deductions for debt payment..... + \$0.00

Total deductions \$6,131.27 Copy total here → \$6,131.27

Part 3: Determine Whether There Is a Presumption of Abuse

39. Calculate monthly disposable income for 60 months

39a. Copy line 4, adjusted current monthly income..... \$6,031.58

39b. Copy line 38, Total deductions..... - \$6,131.27

39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).
 Subtract line 39b from line 39a. (\$99.69) Copy here → (\$99.69)

For the next 60 months (5 years)..... x 60

39d. Total. Multiply line 39c by 60..... 39d. (\$5,981.40) Copy here → (\$5,981.40)

Debtor 1 Tamara P Norman Case number (if known) _____

40. Find out whether there is a presumption of abuse. Check the box that applies:

The line 39d is less than \$8,175*. On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.

The line 39d is more than \$13,650*. On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

The line 39d is at least \$8,175*, but not more than \$13,650*. Go to line 41.

* Subject to adjustment on 4/01/22, and every 3 years after that for cases filed on or after the date of adjustment.

41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out
A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules
(Official Form 106Sum), you may refer to line 3b on that form.

x .25

41b. **25% of your total nonpriority unsecured debt.** 11 U.S.C. § 707(b)(2)(A)(i)(I).
Multiply line 41a by 0.25.

	Copy here →
--	----------------

42. Determine whether the income you have left over after subtracting all allowed deductions
is enough to pay 25% of your unsecured, nonpriority debt.

Check the box that applies:

Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.

Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

Part 4: Give Details About Special Circumstances43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for
which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B).

No. Go to Part 5.

Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment
for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income
adjustments necessary and reasonable. You must also give your case trustee documentation of your actual
expenses or income adjustments.

Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
_____ _____ _____ _____	_____ _____ _____ _____

Debtor 1 Tamara P Norman

Case number (if known) _____

Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Tamara P Norman
Tamara P Norman, Debtor 1

X _____
Signature of Debtor 2

Date 6/23/2019
MM / DD / YYYY

Date _____
MM / DD / YYYY

Current Monthly Income Calculation Details

In re: **Tamara P Norman**

Case Number:

Chapter: **7**

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	United Healthcare	\$6,082.39	\$4,775.24	\$8,032.41	\$4,942.70	\$4,942.70	\$7,414.05 \$6,031.58

Underlying Allowances (as of 06/23/2019)In re: **Tamara P Norman**

Case Number:

Chapter: 7

Median Income Information	
State of Residence	Texas
Household Size	2
Median Income per Census Bureau Data	\$65,429.00

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous	
Region	US
Family Size	2
Gross Monthly Income	\$6,031.58
Income Level	Not Applicable
Food	\$685.00
Housekeeping Supplies	\$72.00
Apparel and Services	\$159.00
Personal Care Products and Services	\$70.00
Miscellaneous	\$302.00
Additional Allowance for Family Size Greater Than 4	\$0.00
Total	\$1,288.00

National Standards: Health Care (only applies to cases filed on or after 1/1/08)	
Household members under 65 years of age	
Allowance per member	\$55.00
Number of members	2
Subtotal	\$110.00
Household members 65 years of age or older	
Allowance per member	\$114.00
Number of members	0
Subtotal	\$0.00
Total	\$110.00

Local Standards: Housing and Utilities	
State Name	Texas
County or City Name	Dallas County
Family Size	Family of 2
Non-Mortgage Expenses	\$609.00
Mortgage/Rent Expense Allowance	\$1,172.00
Minus Average Monthly Payment for Debts Secured by Home	\$0.00
Equals Net Mortgage/Rental Expense	\$1,172.00
Housing and Utilities Adjustment	\$0.00

Underlying Allowances (as of 06/23/2019)In re: **Tamara P Norman**

Case Number:

Chapter: **7**

Local Standards: Transportation; Vehicle Operation/Public Transportation		
Transportation Region	Dallas-Ft. Worth	
Number of Vehicles Operated	1	
Allowance	\$281.00	
Local Standards: Transportation; Additional Public Transportation Expense		
Transportation Region	Dallas-Ft. Worth	
Allowance (if entitled)	\$217.00	
Amount Claimed	\$0.00	
Local Standards: Transportation; Ownership/Lease Expense		
Transportation Region	Dallas-Ft. Worth	
Number of Vehicles with Ownership/Lease Expense	1	
First Car		Second Car
Allowance	\$508.00 OVERRIDDEN--Amount Used: \$200.00	
Minus Average Monthly Payment for Debts Secured by Vehicle	\$0.00	
Equals Net Ownership / Lease Expense	\$200.00	